

Superior Court of Washington
County of Lewis County

<p>_____, Plaintiff/Petitioner,</p> <p style="text-align: center;">vs</p> <p>_____, Defendant/Respondent.</p>	<p>Cause No. _____</p> <p>NOTE FOR TRIAL & INITIAL STATEMENT OF ARBITRABILITY (Civil Calendar Only)</p>
---	--

CHECK ONE: ☐ **NOTE FOR ARBITRATION** ☐ **NOTE FOR TRIAL**

TO CLERK: Please note for Friday, the _____ day of _____, 20____,
at 9:00 a.m.

1. The undersigned attorney certifies that this case is at issue (an answer has been filed).
2. The nature of action is _____.
3. A jury demand was filed on _____ indicating a
☐ 6 person jury ☐ 12 person jury
4. Trial dates available/unavailable:
5. Has this case already been noted for trial? ☐ Yes ☐ No

INITIAL STATEMENT OF ARBITRABILITY

- ☐ This case is subject to arbitration because the sole relief sought is a money judgment and involves no claim in excess of Fifty thousand dollars (\$50,000.00) exclusive of attorney fees, interests and costs.
- ☐ This case is not subject to mandatory arbitration because:
- ☐ Plaintiff's claim exceeds Fifty thousand dollars (\$50,000).
 - ☐ Plaintiff seeks relief other than a money judgment.
 - ☐ Defendant's counter or cross claim exceeds Fifty thousand dollars (\$50,000).
 - ☐ Defendant's counter or cross claim seeks relief other than a money judgment.
- ☐ The undersigned contends that its claim exceeds Fifty thousand dollars (\$50,000) but hereby waives any claim in excess of Fifty thousand dollars (\$50,000) for purposes of arbitration.

MAIL THIS COMPLETED FORM TO:
Lewis County Clerk, 345 W Main St, MS:CLK01, Chehalis WA 98532-1900.

Dated: _____ Signed _____
Printed Name _____
Address _____
Phone () _____
Attorney for _____

LIST THE NAMES, ADDRESSES, AND PHONE NUMBERS OF ALL OTHER ATTORNEYS IN THIS CASE:

Name _____
Address _____
Phone () _____
Attorney for _____

Name _____
Address _____
Phone () _____
Attorney for _____

Name _____
Address _____
Phone () _____
Attorney for _____

Name _____
Address _____
Phone () _____
Attorney for _____